

**UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY**

**ANSELL HEALTHCARE PRODUCTS
LLC,
*Plaintiff***

V.

**GLYCOCOBIOSCIENCES INC.,
*Defendant***

SUMMONS IN A CIVIL CASE

CASE
NUMBER: **2:16-CV-09254-SDW-LDW**

TO: (*Name and address of Defendant*):

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) -- or 60 days if you are the United States or a United States Agency, or an office or employee of the United States described in Fed. R. civ. P. 12 (a)(2) or (3) -- you must serve on the plaintiff an answer to the attached complaint or a motion under rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

WILLIAM T. WALSH

CLERK

Susan Miller

(By) DEPUTY CLERK



ISSUED ON 2016-12-20 15:51:34, Clerk
USDC NJD

| RETURN OF SERVICE | | |
|--|----------|-------|
| Service of the Summons and complaint was made by me(1) | DATE | |
| NAME OF SERVER (<i>PRINT</i>) | TITLE | |
| <i>Check one box below to indicate appropriate method of service</i> | | |
| <p><input type="checkbox"/> Served personally upon the defendant. Place where served: _____ _____</p> <p><input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.</p> <p><input type="checkbox"/> Name of person with whom the summons and complaint were left: _____</p> <p><input type="checkbox"/> Returned unexecuted: _____ _____</p> <p><input type="checkbox"/> Other (specify) : _____ _____</p> | | |
| STATEMENT OF SERVICE FEES | | |
| TRAVEL | SERVICES | TOTAL |
| DECLARATION OF SERVER | | |
| <p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <p>Executed on _____ Date _____</p> <p style="text-align: right;"><i>Signature of Server</i></p> <p style="text-align: right;">_____ <i>Address of Server</i></p> | | |